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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | Docket Number (Optional) 10253-00136-US | |
|---|---|---|
| Application Number          09/727,207-Conf. #2829 | Filed | November 30, 2000 |

For     STITCHED PILE SURFACE STRUCTURE

| Art Unit     1733 | | |
|---|---|---|
| | Examiner | J. L. Goff |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | | Fee | Small Entity Fee | |
|---|---|---|---|---|
| ☐ | One month (37 CFR 1.17(a)(1)) | $120 | $60 | $ |
| ☒ | Two months (37 CFR 1.17(a)(2)) | $450 | $225 | $ 450.00 |
| ☐ | Three months (37 CFR 1.17(a)(3)) | $1020 | $510 | $ |
| ☐ | Four months (37 CFR 1.17(a)(4)) | $1590 | $795 | $ |
| ☐ | Five months (37 CFR 1.17(a)(5)) | $2160 | $1080 | $ |

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number ____22-0185____ . I have enclosed a duplicate copy of this sheet.

I am the
☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
   Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☐ attorney or agent of record. Registration Number _____
☒ attorney or agent under 37 CFR 1.34.
   Registration number if acting under 37 CFR 1.34     47,341

_Myron Keith Wyche_ (signature)
Signature

December 28, 2004
Date

Myron Keith Wyche
Typed or printed name

(202) 331-7111
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of ____1____ forms are submitted.